

INFORMATION FORM FOR PARENT/GUARDIAN

SPORTING SCHOOLS PROGRAM

Sporting Schools is a government funded program aimed at increasing the time and opportunities children have in outdoor play and skill acquisition. It is completely free of charge.

During Term 1, there will be two, six session *Sporting Schools* programs running. The first program is **Badminton for Years 4-6** on Tuesday. The second is **Tennis for Years 1-3** on Wednesday's.

There are up to 20 places available in each program. Students are accepted into the program until it is full. Simply fill out the sign-up sheet and return to your child's classroom teacher. If your child is accepted into the program you will receive a letter of confirmation.

| PROGRAM DATES AND TIMES | | |
|--------------------------------|----------------------------|---------------------------|
| | Tuesday (Badminton) | Wednesday (Tennis) |
| Week 4 | Feb 21 st | Feb 22 |
| Week 5 | Feb 28 th | March 1 st |
| Week 6 | March 28 th | Mar 2 |
| Week 7 | March 7 th | March 8 th |
| Week 8 | Mar 14 | Mar 15 th |
| Week 9 | Mar 21 | March 22 nd |
| | | |

All sessions from 2:30 till 3:30

LOCATION

Children are to meet in the undercover area straight after school, before commencing our activities.

TRANSPORT ARRANGEMENTS

Please be available to pick your child up at 3:30pm, or allow them to walk/ride home if this is what they usually do. There will be no supervision provided after 3:45pm.

CONTACT ARRANGEMENTS DURING THE PROGRAM

If you have any questions please feel free to ring the school office on: **9185 3001** or email Kelly Langlands (program coordinator) at: kelly.langlands@education.wa.edu.au.

NOTIFICATION OF PARTICIPATION

A letter will be sent home with the students who have been accepted into the program. Students are accepted upon receipt of their permission slip until the program is full.

DELIVERY OF ACTIVITIES

Activities will be delivered by Kelly Langlands (Tennis) and Luke Richmond (Badminton)

SPORTING SCHOOLS PROGRAM

Student's Name:

Room Number:

Date of Birth:

School Year:




Sex: Male

Female

Parent/Guardian Full Name:

Relationship to Child:

Contact Information

| | | |
|---|---|---|
|  Home: |  Work: |  Mobile: |
| Address: | | |
| Post Code: | | |
| I have read and understood the information regarding the Sporting Schools Program for Term 1 and give my consent for my child to attend: | | |
| Signature of parent/guardian: _____ Date _____ | | |